September, 2001

S a lan d Marketing es

An eye-opening, monthly newsletter for Penn Treaty Long Term Care Agents

ISSUE:

A Message FROM OUR CEO
A Profitable Second Quarter for Penn Treaty

A Message

From Our CEO It's Bonus Bucks

The Center For LTC Financing

Time Again!

An Important Announcement From The Center For LTC Financing

Prettier Than Freckles

Featured Condition: Macular

eneration

TO METERS

A PARTY OF THE PAR

If you have comments, suggestions, or would like to submit an editorial

WE WANT TO

HEAR FROM YOU! E-mail the Editor at: klevit-valuntas@penntreaty.com

Te have worked day and night getting our act together, getting back to where we should be, and I am happy to report that through all of this, renewals of premiums were up 25 percent for the second quarter of

Despite ceasing new business in a few states to allow the Company's surplus levels to catch up to required amounts, Penn Treaty earned 2.4 million or 20 cents per share on just over \$100 million in

this year.

revenue in the second quarter. This is compared to \$4.8 million in profit on \$94 million in revenue in the same period last year.

These positive results are part of our concerted effort to rebuild shareholder and consumer confidence in Penn Treaty, and we continue to work closely with the



Irving Levit **CEO of Penn Treaty**

state insurance regulators to affirm the Company's reserve and surplus levels. Basically, Continued on page 3

It's Bonus Bucks Time Again! SHOW ME THE MONEY!

Be sure to cash in on your free money!

You will receive an additional \$25 for every application issued, with over \$500 in collected premium submitted with the application. All applications must be submitted between September 1, 2001 and December 31, 2001.

Medicare Supplement business is excluded. All eligible premiums must be collected by 12/31/2001. 🖘

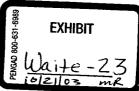




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CENTER FOR LONG-TERM CARE FINANCING



he Center for Long-Term Care Financin is a 501(c)(3) charitable non-profil organization dedicated to ensurant quality Long Term Care for all Americans opposition promoting public policy that targets are public resources to the needlest, while encouraging people who are young health and affluent enough to take responsibilities for themselves and plan ahead for the risk of Long Term Care.

Ask how you can support the Center today

Services provided by the center include

- LTC Bullets Free On-line Newslette Covering Hot Topics in the LTC Areas
- Public and Private Sector Consulting
- Media Articles and Interview
- Research Studies
- Training for LTC Professionals Exortisis and Agents
- Public Speaking at Conferences of Legislative Hearings

*to subscribe to our free newstells.
simply send your name and comotate some information in the text of an especial message in

info@centerlic.org

Center for LTC Singuistre



"The Center seeks to save Medicaid for the needy by getting everyone else to plan early and save, invest, or, bes of all, insure against the risk of Long Term Care. Penn Treaty strongly supports the Center for LTC Financing' education and advocacy efforts on behalf of all Americans. Since its inception, the Center has reached a audience of more than 250 million readers, viewers and listeners with a clear and powerful message the should resonate with all of us both personally and professionally. Please help the Center win the fight for rational and fiscally viable Long Term Care financing system with a generous tax-deductible contributior Your support will make a difference!"

Stephen Moses, President and Founder of the Center For LTC Financing

An Important Announcement From The Center For LTC Financing

The Center for LTG Financing is pleased to announce a new donor only zone on the Center's website at www.centeritcorg

This new password-protected means available to donors who have made personal contributions of at least \$100 and he centers; the all months and the prearricating a donors whave made minimum contribution on a straine below during this since penso.

1 to 10 employee \$2.00 10 to 50 employee \$2.00 50 to 100 employees \$5.00 100+ employees \$1.00

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A Message From Our CEO

Continued from page 1

the number one thing is how we can assure people that the scenario we had this year won't repeat itself.

There are three issues we are now focusing on, which we feel are necessary to stay healthy: an unflagging commitment to paying claims promptly; solid attention to customer service, and open communication and support to our salesforce of 40,000 agents.

Our emphasis now, is on controlled growth. We have submitted a business plan, and are awaiting approval by the state regulators, that maps out how we will address our growth goals with our capital requirements. At this point, I feel the Company is on the right track, and upon approval from the PA Department of Insurance, we are anxious to be in a growth mode again.

As I have stated before, we are continuing our efforts to sell some of our non-core lines of business including our Medicare Supplement and life policies, and our New York Insurance subsidiary, American Independent Network Insurance Company of New YorkSM. At this time, we have signed a letter of intent with Assurity Life Insurance Company (a subsidiary of Woodmen Accident and Life Company) for the purchase of our individual disability income insurance policies.

As always, I as well as the entire staff here at Penn Treaty, appreciate your continued support as we look forward to moving ahead and making strides in the Long Term Care industry.





What's Prettier Than Freckles? (Unknown Author)

An elderly woman and her little grandson, whose face was sprinkled with bright freckles, spent the day at the zoo. Lots of children were waiting in line to get their cheeks painted by a local artist who was decorating them with tiger paws.

"You've got so many freckles, there's no place to paint!" a girl in the line said to the little boy. Embarrassed, the little boy dropped his head.

His grandmother knelt down next to him. "I love your freckles. When I was a little girl I always wanted freckles" she said, while tracing her finger across the child's cheek. "Freckles are beautiful."

The boy looked up, "Really?"

"Of course," said the grandmother. "Why just name me one thing that's prettier than freckles."

The little boy thought for a moment, peered intensely into his grandma's face, and softly whispered, "Wrinkles." 50





Featured CONDITION OF THE MONTH

MACULAR DEGENERATION

The Facts

Macular Degeneration is a "catchall" term referring to a number of different disorders in which central vision is lost, while peripheral vision is retained. Macular Degeneration occurs when the macula, the light sensing cells and most vital area in the center of the retina, degenerates and dies. Macular Degeneration can, in rare cases, affect infants and children as a result of inherited causes. By far however, most Macular Degeneration is age related and generally occurs in individuals over the age of 60. Those over age 75 have nearly a 30 % risk of developing the disease and today, age related Macular Degeneration (AMD) is the leading cause of blindness in the United States.

Age related Macular Degeneration occurs in two forms. The first, which accounts for approximately 90% of those diagnosed, is called dry Macular Degeneration. Dry Macular Degeneration generally progresses very slowly with a gradual loss of central vision. Scientists remain unsure what causes Dry Macular Degeneration. Although only 10% of those diagnosed have the second and more severe Wet form, it accounts for approximately 90% of blindness due to Macular Degeneration. With this form of the disease, abnormal blood vessels develop under the retina. These newly formed blood vessels tend to be weak and often leak blood and fluid resulting in rapid destruction of the macula and loss of central vision in a short period of time.

TREATMENT

There is currently no effective treatment for Dry Macular Degeneration. Although Wet Macular Degeneration may be treated with laser surgery, only 10-15% of those with Wet Macular Degeneration are treatable. Even those treatable are not curable and the majority of patients have a recurrence of the disease.

Underwriting Considerations

Neither type of Macular Degeneration typically results in a total loss of vision. Even those having very poor central vision may be able to perform several of their normal daily tasks. Many sufferers do however, become legally blind or unable to perform all of their ADL's or IADL's independently, resulting in the need for assistance in their home or even admission to a Care Facility. Macular Degeneration is, therefore, a significant risk when considering Long Term Care Insurance and we cannot offer Non-Tax-Qualified benefits or Home Care coverage to these applicants. We can however consider Tax-Qualified Nursing Home coverage.

Upon learning that an applicant has Macular Degeneration, medical records will be requested in order to determine the type and how the disease has progressed. Depending on each individual case, a Paramedical examination may also be requested. Once all of the required information has been reviewed, the following guidelines will be used to determine if eligible for coverage and if so, at which rate class:

A Claims Perspective

Macular Degeneration is a chronic progressive condition that gradually eliminates the central vision of a person. Care needs are anticipated to be long term and generally increase as the disease progresses. Treatment options are limited and prognosis for improved vision is poor. The progression of the disease as it relates to time may occur slowly or rapidly. When a claim is received with this diagnosis, if the disease progresses slowly, a person with Macular Degeneration may be able to manage with limited assistance for a prolonged period of time. Early on, a person may be able to manage Activities of Daily Living independently, but require some assistance with Instrumental Activities of Daily Living due to an impaired visual perception. For example, a person may no longer be able to drive and require transportation to appointments. Assistance with shopping and meal preparation are likely. Other tasks such as reading mail and check writing may still be able to be accomplished by the person at this stage with the use of a low vision magnifier, or assistance may be required. In the early stages of a claim and when the disease progresses slowly, the Plan of Care usually consists of homemaker services a few hours a day for a few days per week. As the disease progresses care needs increase and may include the assistance of Activities of Daily Living such as bathing and dressing as well as assistance with Instrumental Activities of



Daily Living. Ambulation becomes difficult outside their home and generally requires hands on assistance. A claim for Macular Degeneration will most likely last the duration of the available benefits. The loss of independence is a difficult adjustment to make for a person with Macular Degeneration. Community resources, such as American Association for the Blind and Lighthouse for the Blind, are available to assist a person in making the necessary home adaptations in order to maintain their independence for as long as possible.

A Marketing Perspective

Today there are approximately one million people who suffer with age-related macular degeneration, and according to the National Eye Institute, there are approximately 200,000 new cases reported every year, a number that is expected to increase as the baby boomer population ages. The only clue of macular degeneration a person might have is slightly distorted or blurry vision, or difficulty reading. Unfortunately most people do not see a doctor until the condition worsens. As mentioned earlier, there is no cure for macular degeneration, however if caught early, there are some treatments that can help to prolong a person's eyesight.

Smokers are twice as likely to get macular degeneration; therefore anyone with any symptoms should stop smoking immediately to help prolong their vision. It is also recommended to stay out of direct sunlight, and some studies have shown that people who eat spinach, mustard greens, and other leafy vegetables are less likely to get macular degeneration.

What is the impact of macular degeneration? Many people with this disease eventually stop driving, reading, and participating in daily activities. Due to the progression of the disease, depression is more common in people who have macular degeneration, and although it is not a painful or fatal disease, there is no cure, and the result is a total loss of independence.

As a Long Term Care expert, what can you do? First, if you have any clients that have complained about their vision or you notice they are not seeing as well, urge them to go to their doctor immediately. Second, for those clients that have already been diagnosed with some form of macular degeneration, know that their risk of needing care at some point in their life is great, and that you can offer them benefits to help with the care they may need some day. There is no cure for this disease, but you can offer people who have macular degeneration something; some peace of mind. 80

(Sources: "I Couldn't See Well. Learning to Live With Macular Degeneration," by Brian Whitaker, M.S. from http://drktoop.com/dyncon/article.asp?ptp=true%id= \$9270&at=)

"Tracking a Vision Thief," by Camille Rey, from http://my.webmd.com/printing/article/1738.50126)

Why LTCI?

With the Government's System in Shambles, Private Funding Has Never Been More Relevant.

Written by Stephen A. Moses, President of the Center for Long Term Care Financing

People who ought to know have predicted a boom in Long Term Care insurance sales for over a decade. "My goodness," they say, "just look at the aging demographics. Look at their risks. Look at nursing home costs. The public needs Long Term Care insurance! Offer it; they'll buy it."

Yeah, right.

After 25 years of hard selling, anywhere from four to seven percent of seniors and virtually no baby-boomers have bought Long Term Care insurance. How many carriers licked their chops looking to make a killing and left with their tails between their legs? Dozens. How many brokers tried to specialize in LTCI only to give up? Hundreds. How many agents entered the market wide-eyed only to quit in frustration? Thousands.

What's going on? If the need is so great, why aren't more people buying Long Term Care insurance? The answer is very simple. For the past 35 years, with every good intention, the state and federal governments have paid for Long Term Care through Medicaid and Medicare AFTER the insurable event occurs. As a result, the public has been anesthetized to the risk and realities of Long Term Care. As long as they can ignore the risk of Long Term Care, avoid the premiums for private insurance, wait to see if they ever need expensive care, and if they do, transfer the cost to government programs and the provider industry, most will not buy Long Term Care insurance.

"Wait," you object, "everyone knows Medicaid requires impoverishment and Medicare doesn't pay for Long Term Care." Wrong again. The average senior, in terms of income and assets, who needs nursing home care can qualify for Medicaid without significant spend-down and without any fancy legal planning. Virtually anyone else, regardless of income or assets, can qualify quickly by obtaining the right legal advice.

Medicare expenditures for nursing home care are up three-fold since 1990 to 11 percent of total nursing home costs and the program's expenditures for long term home care roughly doubled between 1991 and 1998. In the meantime, so-called "out-of-pocket costs" for Long Term Care—most of which are just Social Security or other income of people already on Medicaid, i.e. not savings or assets— have plummeted from 38 percent in 1990 to 27 percent in 1999.

Continued on page 8







Are You Selling ALLRISK HEALTHCARE™?

An Interview with Herb Schwartz Shows How To Increase Business By 25%!

In the effort to keep Penn Treaty on the leading edge with new and innovative products one in particular has created quite a stir among our representatives. The AllRisk Program offered by Senior Financial Consultants (a subsidiary of Penn Treaty AmericanSM Corporation) was recently rolled out and is garnering high praise for its simplicity, affordability and uniqueness. In an effort to provide our readers with more information we recently interviewed Herb Schwartz, one of the founders of the AllRisk HealthcareSM program. What follows are selected excerpts from that interview:

Q: Mr. Schwartz, how did the idea for the AllRisk HealthcareSM product come about?

Mr. Schwartz: I have been in the Long Term Care business in excess of 30 years and have always recognized the biggest problem in the business to be the lack of underwriting for that sector of that market that gets rejected due to their age or existing health problems. The applications of these people are rejected as "uninsurables" and account for 15-25% of all applications submitted to all companies in long term health care business. This is a tremendous loss for both the person rejected and for the representative looking to help them with their Long Term Care needs. The AllRisk Healthcaresm program was built with both the "uninsurable" client and the representative in mind. Glen Levit, a true visionary in this industry, recognized exactly the same problem and enthusiastically promoted the development of the AllRisk Healthcare™ solution.

Q: Can you tell us how the AllRisk HealthcareSM Program works?

Mr. Schwartz: AllRisk Healthcares was created to assist that "uninsurable" sector of the market and to benefit the representatives selling to them. We have developed a comprehensive network of highly qualified, credentialed nursing homes and home health care facilities in the country. (For a complete listing visit the Penn Treaty website: www.penntreaty.com) Most everyone is accepted regardless of age or health concerns, into a program that offers monthly savings of up to 25%. (For a complete listing of the average discount in an geographic area, visit the Penn Treaty website: www.penntreaty.com) Often the annual plan cost is paid for with the savings made in just the first month or two of care. It is not only highly affordable but is one of the few programs that can only be cancelled by the client. Add to this a "one-stop" 800# service and information plan, savings of up to 40% on prescriptions, dental expenses, vision and eye wear, vitamins and supplements, podiatry, chiropractic, hearing services and

equipment and the representative has a complete product to offer the "uninsurable". Not only does the fulfillment package sent to the client explain all of these benefits in plain language, but it also comes with a beautifully embossed membership card for the wallet with all necessary contact information.

Q: It is obvious why a program addressing the needs of the uninsurable would be beneficial to them but how is this beneficial to the representative?

Mr. Schwartz: Well, let's look at the common sales scenario for a representative on the front line. The representative will likely buy a quantity of leads and immediately reject a number of those leads based on age or other obvious, disqualifying information. From the remaining leads the representative will select one and make a call or two, set an appointment and then visit the client, often at their home. If the application is then rejected he has not only lost the cost of that lead but also the other leads he rejected. Until the AllRisk Healthcare M Program was introduced there was little the representative could do but write-off the cost of all those rejected leads, the representatives time, energy and potential income. As important, the representative was often left with the feeling that they were helpless to assist their client. AllRisk Healthcares provides a solution with six key advantages:

- They can use existing files for immediate AllRisk HealthcareSM sales leads.
- 2. They can earn top commissions.
- AllRisk will lower lead cost and save money, as most prospects are now eligible.
- 4. It is an excellent product for referrals.
- 5. It is a great source of new business to fill in cancelled appointments.
- Finally, AllRisk HealthcareSM is an excellent recruiting tool.

Q: Is there another product like AllRisk HealthcareSM available today?

Mr. Schwartz: As far as we know, there is no other product like it for the Long Term Care market. The AllRisk program provides:

- Memberships available to anyone regardless of his or her health.
- Memberships available to people who have been declined insurance coverage.
- Memberships cost the same for all, regardless of age or state of health.
- It has built-in inflation protection advantages.
- · Total AllRisk benefits and savings are unlimited
- AllRisk Healthcare[™] offers savings for all types in feare including Assisted Living and Home Health Care.
- AllRisk never has an elimination period.



- Membership applications are approved and sales commissions are paid weekly.
- AllRisk provides savings and benefits that members can use to save today including a provider locator service, savings on prescriptions, dental, vision, hearing, etc.

Q: How has the program been accepted so far?

Mr. Schwartz: Since the initial test rollout to a limited number of Senior Financial Consultants representatives (in just nine states) we have been successful in writing in excess of \$1 million in premiums over a short, 2-3 month period. Based on this test Senior Financial Consultants is enthusiastic about providing this product to their 40,000+ representative force and have the national exclusive for this product. This means that Senior Financial Consultants (a subsidiary of PTA) accepts nearly all of otherwise rejected business.

I am happy to report that representatives are quickly realizing that AllRisk HealthcareSM is the first plan of its kind where a representative can recoup the cost on all the rejected leads that they have purchased over the past few years. How? Simply open their own files and they have the perfect client for an AllRisk HealthcareSM plan. Many representatives tell us that they have file drawers full of prospects rejected due to health, age, etc. These files include leads the representative paid for but never called on because the client was clearly "uninsurable". That lead file is now the representative's most valuable asset. Simply put, this is a product aimed at the "uninsurable" and the representative's existing files are full of clients not called on or clients rejected, all because they were "uninsurable". The beauty is in the simplicity, not to mention other benefits to the representative that we didn't originally contemplate

Q: What are these other representative benefits?

Mr. Schwartz: It did not occur to us that the ability to call again on rejected clients also afforded the representative the opportunity to get back into the home to write the spouse that may have also been rejected or to talk to a spouse that had not previously been a lead. This spouse is a candidate for not only the AllRisk Healthcaress program but perhaps also for another product sold by the representative if the client is insurable. Secondly, this is one of the greatest opportunities a representative will ever have to lower his lead costs because he can now pick up referred leads from the person that has never been able 10 get insurance before and has peers who are in the same situation. Word of mouth and direct referral are powerful tools. What better way to generate new prospects at no cost? We currently have many representatives earning additional income every week just by talking about AllRisk Healthcares with their clients.

Another advantage to being a Penn Treaty representative and signing a Senior Financial Consults addendum to sell AllRisk HealthcareSM is that it will allow you to earn

additional income. Why? Because over 42 states have already approved this program.

Q: As you can guess, our representatives will want to know about the financial end. What can a representative expect?

Mr. Schwartz: As I said, top commissions are paid on the AllRisk HealthcareSM plan. However, the turnaround time for commissions on the AllRisk HealthcareSM program is only one to two weeks from the time the application is received by the home office. How many companies that you currently know of can guarantee your commissions are paid within 2 weeks? That one benefit alone is something our representatives, especially new representatives, love and are truly excited about.

Q: Mr. Schwartz, what if there is no nursing home in the AllRisk Healthcare⁵⁰ network that is close to the client's home?

Mr. Schwartz: With over 5,000 of the best, accredited facilities in the United States this is a rare scenario. Even so, we are adding new facilities every day. Additionally, we are giving you, the representative, the right to nominate a nursing home or home care facility in your area for acceptance into the AllRisk HealthcareSM network. A new representative may want to look first at the "Agent Resource Center" on the Penn Treaty website to see what providers and discounts are available in the representatives sales area. We encourage every representative who is thinking of marketing the AllRisk HealthcareSM program to their clients to ask our Supply Department for the complete fulfillment package that is sent to the consumer. We do not believe you will ever find a more professional, well-done consumer oriented product of its kind. The package contains over 30 pages of benefits and information, including answers to the 31 most asked questions for both representatives and clients.

Q: Mr. Schwartz, is there anything else you would like to share with our readers?

Mr. Schwartz: Yes. Each representative should ask himself/herself "Why should I ever lose another sale because the company would not accept my client due to age or health condition?" The answer is that you absolutely should not lose another sale when, as a Senior Financial Consultant representative, you have the right to offer the AllRisk HealthcareSM Program. If this program makes sense to you I feel it is imperative that every representative contact the Marketing Department and ask for a fulfillment package and a prompt for every rejected application in the past few years and from now on. Not only will you increase your income but also your clients will more than thank you for the service you have performed for them.

Note from the Company: If there is any agency who is interested in contracting information on the AllRisk program please call our Marketing Department.



Page 7 of 10





WHY LTC:?

Continued from page 5

The bottom line is that if you opt not to purchase Long Term Care insurance, and the worst happens, the government will step in to preserve your assets for your heirs.

Now, here's the kicker: Although everything I've said so far is true, there are still many pieces to this puzzle. Our welfare-based, government-financed, nursing-home centered Long Term Care system is falling apart. Home health and nursing home bankruptcies are rife; LTC stocks are in the tank; debt and equity capital are unavailable; staff are scarce and underpaid; quality of care is down; lawsuits are common; liability insurance is unaffordable or non-existent. The whole system is collapsing, but the public doesn't know this . . . yet. We are in a turbulent transition phase from an institution-based, welfare-financed Long Term Care system in which private insurance was in low demand to a home and community-based, privately financed Long Term Care system in which private insurance will be in much greater demand.

In the future, the only way to obtain quality Long Term Care at the most appropriate level (home care and assisted living, with nursing home care only as a last resort) will be to pay privately. The only way to pay privately without spending one's own money will be to own private Long Term Care insurance. We must all sound this alarm and wake up the public before it's too late.

The old system that suppressed private Long Term Care insurance is dying. The new system struggling to be born will rely more heavily on private financing. Private Long Term Care insurance will soon have its day in the sun. If you are toiling in that market, hang on. If you're thinking about getting into Long Term Care insurance, now is a very good time. In fact, there never was a better time.

The Center for Long-Term Care Financing's mission is to ensure quality Long Term Care for all Americans. Consult www.centerlic.org for the evidence to support the argument made in this commentary and to subscribe to the Center's free on-line newsletter "LTC Bullets."

This article originally appeared in the June, 2001 issue of Senior Market Advisor. Reprinted with permission.

24 Hours A Day...

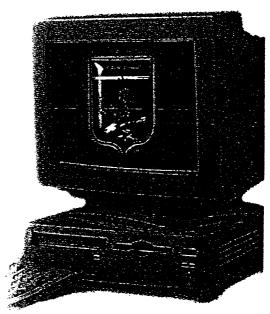
Service, Sales, Communication

"We think consumers benefit when they have easy access to clear, concise information about the wide array of Long Term Care insurance choices available to them today. Everyone benefits when agents have state-of-the-art technology that allows them to provide faster rate quotes and more responsive customer service. Our enhanced internet offerings give both consumers and agents an edge..."

In Levit, Founder and CEO
Penn Treaty American" Corporation

Agent Resource Center, LTCWorks!" www.penntreaty.com

...7 Days A Week.





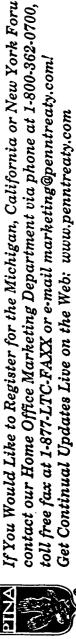
EDITOR-IN-CHIEF:

Kimberly Levit-Valuntas

ASSISTANT EDITOR: ART DIRECTOR: Tracy Levit Sussman Chaval: Redmond



Calent	Calendar of Events for September/October, 2001	vents f	or Sept	ember/(October	, 2001
Sunday	Sunday Monday		Wednesday	Tuesday Wednesday Thursday	Friday	Saturday
6	10	11	Central USA LTC Symposium Detroit, MI	13	Third Northern California LTC Forum Ramon, CA	15
91	17	18	61	30	21	22
23	24	Third New York Metropolitan LTC Forum Melville, NY	26	27	28	59
30	I	CS.	w	4	3	9
N	∞	6	01	11	12	13
PINA If You	If You Would Like to Register for the Michigan, California or New York Forums,	Register for the	Michigan, Califo	rnia or New Yor	k Forums,	ANIC



TOP SELLING AGENTS YFAR-TO-DATE



- 2.
- **Curt Horowitz** 3.
- 4. Steven Hollaway
- 5. **Gerald Stevens**
- 6. Patrick Maude, Jr.
- 7. Roberta Jacobson
- **James Sines** 8.
- 9. William Laufbahn
- Mario Posteraro 10.

Steven Moskowitz-Miller

ENTRIES

Top Selling Agents For August, 2001

Horse

Driver

1.	The Mighty Miller	Steven Moskowitz-Miller
2	Long Haul Saul	Ronald Saul
3.	Wierwolf	Richard Wierman
4.	Sharp As A Tackett	Richard Tackett
5.	Rudd's Bud	Jason Rudd
6.	Warren's White Lightnin'	Fedmina Warren
) 7.	Mach 5 Minkus	Donald Minkus
8.	Wiesen' Up	Michael Wiesenmayer
9.	Run Robert Run	Robert Spencer
10.	Battling Brown	Robert Brown

CALL OF THE RACE

And they're off...

Leading the pack in first position is The Mighty Miller with Long Haul Saul hedging forward in second. Closing the gap in third is Wierwolf with Sharp As A Tackett moving ahead into fourth. Rudd's Bud strides forward into fifth with Warren's White Lightnin' nosing up in sixth place. Mach 5 Minkus is pulling hard in seventh with Wiesen' Up moving fast in eighth. Run Robert Run is putting on the steam in ninth with Battling Brown inching ahead in tenth.



TOP SELLING AGENCIES YEAR-TO-DATE

- **Long Term Preferred Care** 1.
- **Network Insurance Senior Health Division**
- 3. United Insurance Group Agency, Inc.
- 4. **M&O Marketing**
- American Life & Health Group 5.
- 6. **AMA Insurance Services**
- 7. **Central Atlantic Insurance Services**
- Association of California State 8. **Insurance Agency**
- 9. Ameri-Life and Health
- 10. Forman and Associates, Inc.